Staple to face of Application

U.S. DEPARTMENT OF COMMERCE
PATENT & TRADEMARK OFFICE

APPLICATION TRANSFER REQUEST FOR S.N. _09/691,552_

Section I. TRANSFER REQUEST BY (PRINT NAME) _____ **Alexander Eisen** _____ **Date**: _11/14/02_

TO: Art Unit _2632_ Class/sub _340/425.5 +_ FROM: A.U. _2674_ Class 345 _____

REASON:

Land vehicle alarm/indicator

Gatekeeper concurrence _____ Hand carried: Personally accepted by _____

Section II a. DISPOSITION BY RECEIVING TC By: _Mullen_ A.U. _2632_ Date _12/2/02_

☐ **ACCEPTED BY RECEIVING T.C.**

NOT ACCEPTED ☒ Forward to ~~receiving TC Post Classifier~~ _W. Garber (2609)_

☐ Non-classification issue/other, return to Originating TC/AU _____

REASON: _Claims heads-up display_ (345(7+)) _— indep. claims recite details of "image display" — best examined in 345._

Section II b. DISPOSITION BY RECEIVING TC POST CLASSIFIER

☐ This dispute was resolved. Forward to TC/AU _____ Class/Sub _____ Post Classifier _____ Date _____

Concurring _____ Date _____

☐ This dispute was not resolved, forward to DISPUTE RESOLUTION PANEL

Post Classifier Assessment:

Gatekeeper Concurrence _____ Post Classifier _____ Date _____

Section III. DISPOSITION BY DISPUTE RESOLUTION PANEL Date _____

Panel Decision: Forward to Technology Center / Art Unit _____ Class/sub _____

REASON:

Panel Member _____ Concurring Panel Member _____

☐ This application **MAY NOT** be returned to the dispute resolution panel. **THIS IS A FINAL DISPOSITION.**
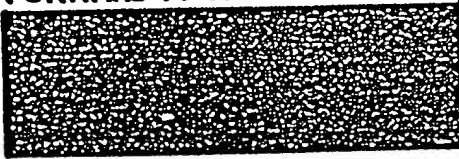
2700 INTERNAL TRANSFER REQUEST FOR S.N. 09/691,552

USP10

DATE: _____	**FROM:** _____Lee_____ (print name)

FORWARD TO:	REASON(S):	
A. Art Unit: 2632	A. You had Parent	(check box)
B. Class: 340	B. See Title	(check box)
C Subclass: 500†	C. See Abstract	(check box)
	D. See Claim(s): _____	

FURTHER EXPLANATION IF NEEDED:

Conditional responsive system

DATE: _____	**FROM:** _____ (print name)

FORWARD TO:	REASON(S):	
A. Art Unit: _____	A. You had Parent	(check box)
B. Class: _____	B. See Title	(check box)
C Subclass: _____	C. See Abstract	(check box)
	D. See Claim(s): _____	

FURTHER EXPLANATION IF NEEDED:

DATE: _____	**FROM:** _____ (print name)

FORWARD TO CLASSIFIER	REASON(S):	
	A. You had Parent	(check box)
	B. See Title	(check box)
	C. See Abstract	(check box)
	D. See Claim(s): _____	

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION

DATE: _____	**CLASSIFIER:** _____

FORWARD TO:	REASON(S):	
A. Art Unit: _____	A. You had Parent	(check box)
B. Class: _____	B. See Title	(check box)
C Subclass: _____	C. See Abstract	(check box)
	D. See Claim(s): _____	

FURTHER EXPLANATION IF NEEDED: